



**Subject: CANS CASE PROTOCOL**

**Supplemental to DCS Policy: 11.1, Assessment Process & Tools**

The Child and Adolescent Needs and Strengths (CANS) tool is an assessment tool which best exemplifies strength-based, culturally responsive and family focused casework. The CANS produces the least stigma or label for the children and families served. It provides a communication basis for understanding the permanency and treatment needs of youth and making decisions about care and services. The CANS consists of approximately sixty-five (65) items that are used to evaluate how the Department and its partners act in the best interests of children and families. The CANS assesses the services appropriate to meet the needs of children ages five (5) and older.

1. The CANS assessment tool is completed by DCS staff in order to assess the strengths and needs of the child and family. Gathering this information may take place by:
  - a) Interviews
  - b) Observations
  - c) Records checks (see form **CS-0687. Criminal History and IV-E Eligibility Checklist**)
  - d) Collateral reports
  - e) Evaluations
  - f) Pictorial tools (i.e. genogram, timeline, family map)
  - g) Other DCS assessment tools
2. DCS staff interact with families and children in a strength-based, culturally responsive, and family centered manner using culturally competent interpersonal skills that demonstrate genuineness, empathy, and respect for the family in accordance with DCS Policy **31.7. Building, Preparing, and Maintaining Child and Family Teams.**
3. All certified DCS employees that work with child and family assessments, as applicable, ensure that the assessments are conducted appropriately and contain accurate information on child/youth/family for each case type or program.

**Non Custodial CFTM-**

1. If DCS staff has specific knowledge of the child and family circumstances leading to a removal or commitment to custody, CPSI/CPSA invites the custodial FSW and Family Service Worker (FSW) Team Leader (TL) to the non-custodial Child and Family Team Meeting (CFTM). The DCS staff should have open discussion and communication and the CANS is initiated and routed to the appropriate supervisor by the FSW.
2. If the FSW TL is present, they and the COE Assessment Consultant review the CANS scores to check for accuracy and reliability and provide supervision to ensure that any needs, risks, strengths or services for the family are identified. The TL or COE Assessment Consultant approve, deny, or return for re-work.

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3. If the FSW/FSW TL are not present for the non-custodial CFTM, then a conversation occurs to share information from the non-custodial FAST and other relevant case details in order for the FSW to complete the CANS.
4. The FSW TL and COE Assessment Consultant review the CANS scores to check for accuracy and reliability and provide supervision to ensure that any needs, risks, strengths or services for the family are identified. The TL or COE Assessment Consultant approve, deny, or return for re-work.

### **New Custody Cases**

1. The CANS is initiated on all children (ages 5 and above) entering custody, regardless of adjudication or placement location. It is approved by the TL and finalized by the COE Assessment Consultant within seven (7) business days of the child entering custody.
2. For CPS removals, the custodial FSW initiates the CANS with all known information after having an open conversation with CPSI/CPSA. If a non-custodial CFTM was not held a custodial CFTM will be held within seven (7) calendar days to ensure adequate information is gathered from the family and/or team to complete the CANS. The CANS is completed prior to the CFTM if enough information is available or during the CFTM, as appropriate. The TL of the FSW that completed the assessment reviews the CANS assessment for accuracy. The TL and COE Assessment Consultant approves, denies, or returns the CANS assessment for re-work.
3. If there is a non-custodial case open at the time the youth enters custody, the CPSI/CPSA/FSS/FCIP worker is required to provide the custodial FSW with a copy of the completed FAST 2.0 assessment and review the case with the FSW at the time the child enters custody.
4. For dependent/neglect or unruly children entering custody through the court system, the designated DCS staff person (as identified by each region) initiates the CANS, completes the assessment and routes before the initial CFTM. Review of the CANS assessment by the TL and COE Assessment Consultant occurs before the CFTM. The TL or COE Assessment Consultant approves, denies, or returns the CANS assessment for re-work.
5. The CANS is initiated for Juvenile Justice Youth entering custody. It is completed prior to the initial CFTM.
6. The FSW partners with the regional Psychologist, Administrative Leadership, Education Specialist and/or Nurse Specialist when a CANS identifies a need that suggests a professional consultation. (Ex. If medical is scored actionable (2 or 3) then the Nurse Specialist is notified.)

### **Reassessment CANS**

1. The CANS is always completed prior to the revision of the custodial permanency plan in order to coincide with permanency plan revisions.  
**Note:** The FSW contacts the contract agency when completing or updating a CANS to make sure that the most current information on the child/family is available. An alert in TFACTS will be generated every 6 months on children (ages 5 and above).
2. All CANS eligible youth receive an updated CANS at least every six (6) months and/or the revision of the custodial permanency plan. For youth receiving Level 4 services, a reassessment CANS is completed at a minimum of every three (3) months and/or at the request of the regional psychologist.
3. A reassessment CANS for Juvenile Justice youth on Aftercare is done at least every six (6) months.

**Transition CANS**

1. The CANS is completed and/or reviewed at any major transitional period throughout the custody episode. These transitions include:
  - a) Placement change
  - b) Placement disruption
  - c) Major goal change
  - d) Level change (including within the same contractor)
  - e) Lateral move
  
2. If a new CANS is completed and approved by the COE within thirty (30) days of the move that CANS serves as both the baseline CANS at the new agency and an exit CANS for the discharging agency.

**Trial Home Visit CANS**

1. The CANS is completed prior to the CFTM, if not it is completed within twenty-four (24) hours following the CFTM. The completed CANS is submitted for review to the COE Assessment Consultant.
2. A Trial Home Visit CANS is completed to identify ongoing child and family needs and strengths prior to the child going on a Trial Home Visit (THV) even if it is in the context of a discharge CFTM.

**Discharge CANS**

Discharge CANS is completed prior to the child being discharged from custody (ending the Trial Home Visit). In the case of immediate discharge action, a discharge CANS is completed, approved, and finalized within five (5) days of the child exiting custody. (The CANS is submitted to the COE Assessment Consultant within five (5) business days of discharge). This process is completed to ensure that DCS considers the ongoing needs of a child and family after the custody episode ends. The FSW can review any previous CANS generated on the child/family and compare it to the discharge CANS in order to monitor and track the progress of a child and family. Following are discharge guidelines:

- a) Effective January 1, 2014, Juvenile Justice is no longer required to complete a Discharge CANS; however the CANS may be required for some youth leaving the YDC. See the YDC CANS section below for details.
- b) The assigned FSW notifies the COE Assessment Consultant of the upcoming discharge from custody.
- c) Prior to a child's release from custody, the FSW completes and routes a discharge CANS assessment. The TL approves the completed CANS assessment and forwards the CANS to the COE Assessment Consultant for finalization.
- d) The CANS is reviewed by the FSW, TL, and COE Assessment Consultant to ensure that any needs, risks, strengths, and services for the family are identified. The TL or COE Assessment Consultant approves, denies, or returns the CANS assessment for re-work.

**Extension of Foster Care Services**

1. Extension of Foster Care young adults receive a CANS when circumstances exist that warrant placement change; or, if a traditional placement is identified as the best housing service option by the young adult and his or her Child and Family Team when eligible young adults return from a break in service.

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2. The assigned FSW notifies the COE Assessment Consultant of the Extension of Foster Care young adults who require a CANS.
3. The FSW selects the CANS type label "Extension of Foster Care", completes and routes the Extension of Foster Care CANS to the TL for review and then routes to the COE Assessment Consultant for final approval. Worker utilizes information gathered through means (interview, observation, etc.) in Section 1 of the CANS Protocol.
4. The CANS is completed and approved prior to a Placement Stability CFTM or within ten (10) days of approval of the Re-Establishment of Extension of Foster Care and prior to the initial CFTM.
5. The CANS is reviewed by the worker, TL and COE Assessment Consultant to ensure needs, risks, strengths and appropriate needed services are identified for the young adult.
6. The CANS actionable identified needs and strengths are addressed in the Transition Plan to determine additional supportive services.
7. The TL or COE Assessment Consultant approves, denies or returns the CANS assessment for re-work.
8. An (additional/follow-up) Extension of Foster Care CANS is completed based on need.

## **Juvenile Justice**

### **Juvenile Justice Non-Custodial Cases**

1. A CANS is initiated on all youth placed on Pretrial Diversion, Judicial Diversion, Probation or who are under in-state Interstate Compact for Juveniles supervision within 21 days of the supervision begin date.
2. A reassessment CANS will be initiated every (6) months.
3. If a youth enters custody and the current CANS is less than 30 days old, a reassessment is not required unless significant change occurred during that time.

### **YDC CANS:**

For Juvenile Justice youth placed in a Youth Development Center (YDC), the custodial FSW is responsible for completing all initial CANS assessments. The YDC Residential Case Manager (RCM) completes all subsequent CANS assessments while the youth is placed at the YDC. This includes the following CANS types:

- a) All reassessment CANS (every six (6) months).
- b) All Trial Home Visit (THV) CANS, if the youth begins the THV while placed at the Youth Development Center.
- c) A Discharge CANS is completed on youth who will not be supervised on Aftercare, including determinate sentence youth and those who age out of custody directly from a YDC.
- d) The YDC Residential Case Manager routes all CANS directly to the COE Assessment Consultant for approval.
- e) Before completing a reassessment CANS, the RCM must review the most recent CANS to assess progress or lack thereof on any previous needs and strengths in order to address them on the CANS reassessment.
- f) The RCM must consult with the FSW in order to complete the Caregiver section of the CANS.

**CANS Documentation**

1. The CANS is initiated, completed, and approved in TFACTS.
2. The CANS manual, glossary, and interview format is available in the help link of TFACTS. The CANS definitions/anchors needed to accurately score the CANS are located in the CANS manual under the help link.
3. Information regarding scores of the CANS are reflected on the Family Functional Assessment in TFACTS. The FFA can be updated at the same time the CANS is completed in TFACTS. At the end of each CANS section: (Safety, Well-being, Permanency, and the modules) text can be added in the text field to provide FFA supporting documentation of the CANS scores to capture the current information on the child and family in greater depth.
4. Copies of all CANS are placed in the child's record, included in the placement referral packet, and made available to the contractors for review. To print off a CANS summary go to "reports" hyperlink for the CANS record and generate the report "CANS".
5. The DCS worker documents the reason the CFTM level recommendation differs from the CANS intensity of service recommendation in TFACTS.

**Training and Reliability**

1. All DCS staff with case management responsibility, placement responsibility, or with CFTM involvement are trained yearly on the CANS. Staff are familiar with its language and are able to demonstrate skills in administering and scoring the CANS. All applicable DCS staff require yearly certification. Staff are certified at a .70 or above on a training vignette.
2. Training is provided by the regional COE Assessment Consultant. A CANS manual, glossary, and interview format is provided during training sessions.

**DCS Partnership with COE Assessment Consultants**

1. The FSW, PSD staff, facilitator, TL and CPS partner with the COE Assessment Consultant to identify needs, risks, strengths, and services for the child and family, incorporating knowledge of community partners and referral sources. Possible options for intervention and treatment modalities are discussed and shared with supervisory staff.
2. Child Health units inquire and utilize CANS information.
3. Facilitators inquire about CANS for CFTM purposes and utilize information needed.
4. PSD inquire and utilize information for placement purposes.
5. DCS staff can contact COE Assessment Consultants during normal business hours for review and consultation. DCS utilizes and plans for actionable items (2 or 3 on the CANS).

**Utilization Review Process**

To guide any decisions based on the CANS, the regional Utilization Review process should include a confirmation of a current CANS based on protocol guidelines.